Date of Depusi	C. Dune DAME	WOL '		MITTAL Attorne		20363-019UTIL				
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INSTRUCTIONS: This form should be used for transpiring the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence is considered to the current correspondence address as indicated unless corrected below or directed single-time in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.										
		lock I for any change of address)	Fee	e: A certificate of mailing (s) Transmittal. This certif ers. Each additional paper e its own certificate of mai	icate cannot be used for	any other accompanying				
MINTZ, LEVI AND POPEO, F ONE FINANCL BOSTON, MA	N, COHN, FERR P.C. AL CENTER	IS, GLOVSKY	I he Stat addi tran	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
						(Depositor's name) (Signature)				
			·			(Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		`	CONFIRMATION NO.				
10/627,075 TITLE OF INVENTION	07/24/2003 COMPOSITION AND	METHOD FOR IMAGI	David M. Livingston NG CELLS	06/05/2008 TL	20363-019 .UU22 00000001 10	527075 3113				
				01 FC:2501 02 FC:1504 03 FC:8001		729.00 OP 300.00 OP 30.00 OP				
APPŁN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE				
nonprovisional	YES	\$720	\$300	\$0	\$1020	06/03/2008				
EXAM	INER	ART UNIT	CLASS-SUBCLASS	_						
BERTOGLIO		1632	536-024100							
"Fee Address" ind	ondence address (or Cha 3/122) attached. ication (or "Fee Address 12 or more recent) attach	nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Mintz, Levin, Cohn, Ferris Glovsky and Popeo, P.C. 2Ivor R. Elrifi 3 Cynthia Kozakiewicz							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	pe)		•				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Dana Farba	r Cancer Inst:	ituta Tma			,					
		•	Boston, MA	rational Valor						
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fec(s) are submitted: Solution Sol										
	s SMALL ENTITY statu	s. See 37 CFR 1.27.		ger claiming SMALL ENT						
NOTE: The Issue Fee and interest as shown by the	d Publication Fee (if requeecords of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than the Office.	ne applicant; a registered a	ttorney or agent; or the a	ssignee or other party in				
Authorized Signature				Date June 3,	2008					
Typed or printed name	Cynthia Koza	kiewicz	<u> </u>	Registration No. 42,764						
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.										

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AND POPEO, P. ONE FINANCIA BOSTON, MA 02	C. L CENTER		· .	States Postal Service vaddressed to the Mai transmitted to the USF	with sufficien il Stop ISSU PTO (571) 27:	t postage for fir E FEE address 3-2885, on the c	g deposited with the United st class mail in an envelope above, or being facsimile late indicated below. (Depositor's name) (Signature) (Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/627,075 07/24/2003 David M. Livingston 20363-019 TITLE OF INVENTION: COMPOSITION AND METHOD FOR IMAGING CELLS							3113
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0		\$1020	06/03/2008
EXAMI	NER	ART UNIT	CLASS-SUBCLASS				
BERTOGLIO, VALARIE E 1632		1632	536-024100				
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PLEASE NOTE: Unler recordation as set forth (A) NAME OF ASSIGN Dana Farber	ss an assignee is identi in 37 CFR 3.11. Comp NEE Cancer Inst:	itute, Inc.	data will appear on the Ta substitute for filing (B) RESIDENCE: (C) Boston, M	ne patent. If an assign an assignment. ITY and STATE OR C	COUNTRY)		ocument has been filed for
A. The following fee(s) ar Issue Fee Publication Fee (No Advance Order - #	small entity discount p of Copies 10	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0311 (enclose an extra copy of this form).					
5. Change in Entity Statu a. Applicant claims:	•	•	☐ h Annlicant is no	longer claiming SMAI	II ENTITY	status San 27 Cl	EP 1 27(a)(2)
NOTE: The Issue Fee and	Publication Fee (if requ	ired) will not be accepted	d from anyone other th				e assignee or other party in
Authorized Signature	Cynthia Koza	kiewicz		DateJune Registration N	io. <u>42,76</u>	4	
This collection of informat an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313 Under the Paperwork Redu	3-1430.		• •				by the USPTO to process) g gathering, preparing, and ne you require to complete urtment of Commerce, P.O. for Patents, P.O. Box 1450, number.

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

Express Mail Label No.: EV923372194US

Date of Deposit: June 3, 2008 Attorney Docket No.: 20363-019UTIL



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Livingston, et al.

SERIAL NUMBER: 10/627,075 EXAMINER: Bertoglio, Valarie E.

FILING DATE: July 24, 2003 ART UNIT: 1632

FOR: COMPOSITION AND METHOD FOR IMAGING CELLS

Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Transmitted herewith for filing in the present application are the following documents:

- 1. Response to Notice of Allowance (1 pg);
- 2. Completed Form PTOL-85B (1 pg);
- 3. Check No. 25636 in the amount of \$1,020.00 for issue fee;
- 4. Check No. 25637 in the amount of \$30.00 for advanced order; and
- 5. Return Postcard.

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at 617-542-6000, Boston, Massachusetts.

The Commissioner is authorized to charge any additional fees that may be due, or to credit any overpayment, to the undersigned's account, Deposit Account No. 50-0311 Ref. No. 20363-019UTIL. A duplicate copy of this transmittal letter is enclosed herewith.

Respectfully submitted,

Ivor R. Elriff Reg. No. 39,529

Cynthia Kozakiewicz, Reg. No. 42,764

Attorneys for Applicants c/o MINTZ, LEVIN

Tel: (617) 542-6000 Fax: (617) 542-2241 Customer No.: 30623

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Cynthia Kozakiewicz, Reg. No. 42,764

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Fax: (617) 542-2241

Customer No.: 30623

Dated: June 3, 2008

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Date of Deposit: June 3, 2008

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